

# Senate File 2356 - Enrolled

Senate File 2356

## AN ACT

RELATING TO THE HEALTH CARE INCLUDING IOWACARE PROGRAM PROVISIONS AND THE CREATION OF AN IOWA INSURANCE INFORMATION EXCHANGE TO PROMOTE TRANSPARENCY, QUALITY, SEAMLESSNESS, AND INFORMED CHOICES RELATIVE TO HEALTH CARE COVERAGE.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

### DIVISION I

#### IOWACARE PROGRAM AND OTHER HEALTH CARE OPTIONS

Section 1. Section 249J.7, Code 2009, is amended to read as follows:

249J.7 Expansion population provider network.

1. a. Expansion population members shall only be eligible to receive expansion population services through a provider included in the expansion population provider network. Except as otherwise provided in this chapter, the expansion population provider network shall be limited to a publicly owned acute care teaching hospital located in a county with a population over three hundred fifty thousand, the university of Iowa hospitals and clinics, ~~and the state hospitals for persons with mental illness designated pursuant to section 226.1 with the exception of the programs at such state hospitals for persons with mental illness that provide substance abuse treatment, serve geropsychiatric patients, or treat sexually violent predators~~ and a regional provider network utilizing the federally qualified health centers or federally qualified health center look-alikes in the state, to provide primary care to members.

b. (1) The department shall develop a plan to phase-in the regional provider network by determining the most highly underserved areas on a statewide and regional basis, and targeting these areas for prioritization in implementing the regional provider network. In developing the phase-in plan the department shall consult with the medical assistance projections and assessment council created in section 249J.20. Any plan developed shall be approved by the council prior to implementation. The phase-in of the regional provider network shall be implemented in a manner that ensures that program expenditures do not exceed budget neutrality limits and funded program capacity, and that ensures compliance with the eligibility maintenance of effort requirements of the federal American Recovery and Reinvestment Act of 2009.

(2) Payment shall only be made to designated participating primary care providers for eligible primary care services provided to a member.

(3) The department shall adopt rules pursuant to chapter 17A, in collaboration with the medical home advisory council created pursuant to section 135.159, specifying requirements for medical homes including certification, with which regional

provider network participating providers shall comply, as appropriate.

(4) The department may also designate other private providers and hospitals to participate in the regional provider network, to provide primary and specialty care, subject to the availability of funds.

(5) Notwithstanding any provision to the contrary, the department shall develop a methodology to reimburse regional provider network participating providers designated under this subsection.

c. Tertiary care shall be provided to eligible expansion population members residing in any county in the state at the university of Iowa hospitals and clinics.

d. Until such time as the publicly owned acute care teaching hospital located in a county with a population over three hundred fifty thousand notifies the department that such hospital has reached service capacity, the hospital and the university of Iowa hospitals and clinics shall remain the only expansion population providers for the residents of such county.

2. Expansion population services provided to expansion population members by ~~providers included in the expansion population provider network~~ the publicly owned acute care teaching hospital located in a county with a population over three hundred fifty thousand and the university of Iowa hospitals and clinics shall be payable at the full benefit recipient rates.

3. Providers included in the expansion population provider network shall submit clean claims within twenty days of the date of provision of an expansion population service to an expansion population member.

4. Unless otherwise prohibited by law, a provider under the expansion population provider network may deny care to an individual who refuses to apply for coverage under the expansion population.

5. Notwithstanding the provision of section 347.16, subsection 2, requiring the provision of free care and treatment to the persons described in that subsection, the publicly owned acute care teaching hospital described in subsection 1 may require any sick or injured person seeking care or treatment at that hospital to be subject to financial participation, including but not limited to copayments or premiums, and may deny nonemergent care or treatment to any person who refuses to be subject to such financial participation.

6. The department shall utilize certified public expenditures at the university of Iowa hospitals and clinics to maximize the availability of state funding to provide necessary access to both local primary and specialty physician care to expansion population members. The resulting savings to the state shall be utilized to reimburse physician services provided to expansion population members at the university of Iowa college of medicine, to reimburse providers designated to participate in the regional provider network for services provided to expansion population members, and for deposit in the nonparticipating provider reimbursement fund created in section 249J.24A to be used in accordance with the purposes and

requirements of the fund.

7. The department shall adopt rules to establish clinical transfer protocols to be used by providers included in the expansion population provider network.

Sec. 2. Section 263.18, subsection 4, Code 2009, is amended to read as follows:

4. The physicians and surgeons on the staff of the university of Iowa hospitals and clinics who care for patients provided for in this section may charge for the medical services provided under such rules, regulations, and plans approved by the state board of regents. However, a physician or surgeon who provides treatment or care for an expansion population member pursuant to chapter 249J shall ~~not charge or only receive any~~ compensation for the treatment or care ~~except the salary or compensation fixed by the state board of regents to be paid from the hospital fund provided in accordance with section 249J.7.~~

Sec. 3. REVIEW OF MEDICAL TRANSPORTATION COSTS FOR IOWACARE. The department of human services shall review the costs of transportation to and from a provider included in the expansion population provider network under the IowaCare program. The department shall report the results of the review to the general assembly by December 15, 2010.

Sec. 4. DIABETES == PLAN FOR COORDINATION OF CARE. The department of public health shall work with all appropriate entities to develop a plan for coordination of care for individuals with diabetes who receive care through community health centers, rural health clinics, free clinics, and other members of the Iowa collaborative safety net provider network established pursuant to section 135.153, as determined by the department. The plan may include provisions to establish a diabetic registry, to provide access to medically necessary drugs through entities such as the Iowa prescription drug corporation, and to collect data as necessary to assist the affected medical providers in tracking and improving the care of their patients with diabetes, while also informing future public policy decision makers regarding improved care for individuals with diabetes, notwithstanding an individual's health care coverage status or choice of health care provider.

Sec. 5. IOWACARE == EXTENSION OF WAIVER. The department of human services shall amend the extension proposal for the IowaCare section 1115 demonstration waiver and shall submit applicable state plan amendments under the medical assistance program to provide expansion population services through the expansion population network pursuant to section 249J.7, as amended by this Act, within the budget neutrality cap and subject to availability of state matching funds.

Sec. 6. IOWACARE POPULATION == OPTIMIZATION OF SERVICE DELIVERY AND OUTCOMES. The publicly owned acute care teaching hospital located in a county with a population over three hundred fifty thousand, the federally qualified health center located in such county, and the university of Iowa hospitals and clinics shall actively collaborate to optimize effective and efficient delivery of services that result in the best possible outcomes for IowaCare members.